

Massachusetts All-Payer Claims Database: Technical Assistance Group (TAG) meeting with Health Care Payers

August 14, 2012



DIVISION OF
Health Care
Finance and Policy

Objectives for today's meeting

- Welcome and Introductions
- Data Release
- Quality Assurance (QA) Profile Reports
- Eligibility Submissions
- DOI Aggregate Reporting
- Sister Agency Data Needs
- Edit Updates
- Technical Support – Payer Specific Questions
- Open Discussion

Data Release

Data Release Committee

July 26 Meeting:

The Health Connector: Risk Adjustment per
Affordable Care Act



August 30 Meeting:

Center for Health Policy & Research, University of
Massachusetts Medical School: Massachusetts
Patient Centered Medical Home Initiative
Evaluation



Data Release Web Page

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APCD Data Application and Related Information

[Regulation - 114.5 CMR 22:00: Health Care Claims Data Release](#)
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Applications Received and Commenting

Below are the applications for APCD data. All applications for APCD data may be reviewed and commented upon.

Applicant / Application (Status)	Project Title / Study Name	Date of Posting	Level	Comment
The Massachusetts Health Connector (PDF)  Word  (Approved)	Risk Adjustment per Affordable Care Act	July 13, 2012	Restricted	Comment period has ended

 **DIVISION OF**
Health Care
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Quality Assurance (QA) Profile Reports

Quality Assurance (QA) Profile Reports

- In an effort to obtain the best possible data available, the Division has implemented a data quality assurance framework for standardization, examination, correction, and monitoring of the data.
- The Division currently engages in multiple activities to measure and improve the quality of the data: edit reports, conference calls, monthly work group meetings
- As we introduced in the June TAG call, the Division contracted with JEN Associates, Inc. of Cambridge, MA to design, develop and implement additional quality assurance reports.
- We have expanded these reports to include 2008 and 2009 data and Provider and Product data submissions.

Naming Convention for the QA Profile Reports

- The following are examples of report name by filing type:
 - XXXXX_105_2009V01_2012_08.xls (for Medical Claim)
 - XXXXX_106_2009V01_2012_08.xls (for Pharmacy Claim)
 - XXXXX_107_2009V01_2012_08.xls (for Dental Claim)
 - XXXXX_108_20082009V01_2012_08.xls (for Member Eligibility)
 - XXXXX_109_2011V01_2012_08.xls (for Provider)
 - XXXXX_110_20102011V01_2012_08.xls (for Product)

Contents of the QA Profile Reports

- The QA Profile Reports contains the following six tabs:
 - Intro - Introduction
 - Report Summary - Number of records by submission Year-Month
 - Univariate Summary - Univariate analysis of numeric variables
 - Long Char Missing Summary - Analysis of character variables with more than 5 characters
 - Short Char Frequency Summary - Analysis of character variables with less than or equal to 5 characters
 - Monthly Summary -Time analysis of submitted records and unique IDs over time

Examples for the Product and Provider in the QA Profile Reports

Provider Report Summary

XXXXX_109_2011V01_2012_08.xls [Compatibility Mode] - Microsoft Excel

Home Insert Page Layout Formulas Data Review View Nitro PDF SAS

A1 Total provider lines submitted:

	A	B	C	D	E	F	G	H
1	Total provider lines submitted:							
2	Submission Year	Submission Month	Submission Control ID	Count of Provider Lines				
3	2011	1						
4	2011	2						
5	2011	3						
6	2011	4						
7	2011	5						
8	2011	6						
9	2011	7						
10	2011	8						
11	2011	9						
12	2011	10						
13	2011	11						
14	2011	12						
15								
16	Year	Month	Year-Month	Unique PlanProviderID in Year-Month				
17	2008	01	200801					
18	2008	02	200802					
19	2008	03	200803					
20	2008	04	200804					
21	2008	05	200805					
22	2008	06	200806					
23	2008	07	200807					
24	2008	08	200808					
25	2008	09	200809					
26	2008	10	200810					
27	2008	11	200811					
28	2008	12	200812					
29	2009	01	200901					
30	2009	02	200902					
31	2009	03	200903					
32	2009	04	200904					
33	2009	05	200905					

INTRO Report Summary Univariate Summary Long Char Missing Summary Short Char Frequency Summary Monthly Summary

Ready 100%

Provider Short Char Frequency SummaryTab

XXXXX_109_2011V01_2012_08.xls [Compatibility Mode] - Microsoft Excel

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A140 fx ProviderIDCode

	A	B	C	D	E	F	G	H	I	J	K	L	M
140	ProviderIDCode	Number_of_Levels											
141	ProviderIDCode	1		61%		61%							
142	ProviderIDCode	2		39%		100%							
143	P4PFlag	Number_of_Levels											
144	P4PFlag	3		100%		100%							
145	NonClaimsFlag	Number_of_Levels											
146	NonClaimsFlag	3		100%		100%							
147	UsesElectronicMedicalRecords	Number_of_Levels											
148	UsesElectronicMedicalRecords	3		100%		100%							
149	AcceptingNewPatients	Number_of_Levels											
150	AcceptingNewPatients	2		95%		95%							
151	AcceptingNewPatients	1		5%		100%							
152	OfferseVisits	Number_of_Levels											
153	OfferseVisits	3		100%		100%							
154	Hasmultipleoffices	Number_of_Levels											
155	Hasmultipleoffices	3		100%		100%							
156	PCPFlag	Number_of_Levels											
157	PCPFlag	2		95%		95%							
158	PCPFlag	1		5%		100%							
159	DelegatedProviderRecordFlag	Number_of_Levels											
160	DelegatedProviderRecordFlag	1		100%		100%							
161	OfficeType	Number_of_Levels											
162	OfficeType			100%		100%							
163	PrescribingProvider	Number_of_Levels											
164	PrescribingProvider	1		78%		78%							
165	PrescribingProvider	2		22%		100%							
166	PPOIndicator	Number_of_Levels											
167	PPOIndicator	2		83%		83%							
168	PPOIndicator	1		17%		100%							
169	RecordType	Number_of_Levels											
170	RecordType	PV		100%		100%							
171													
172													

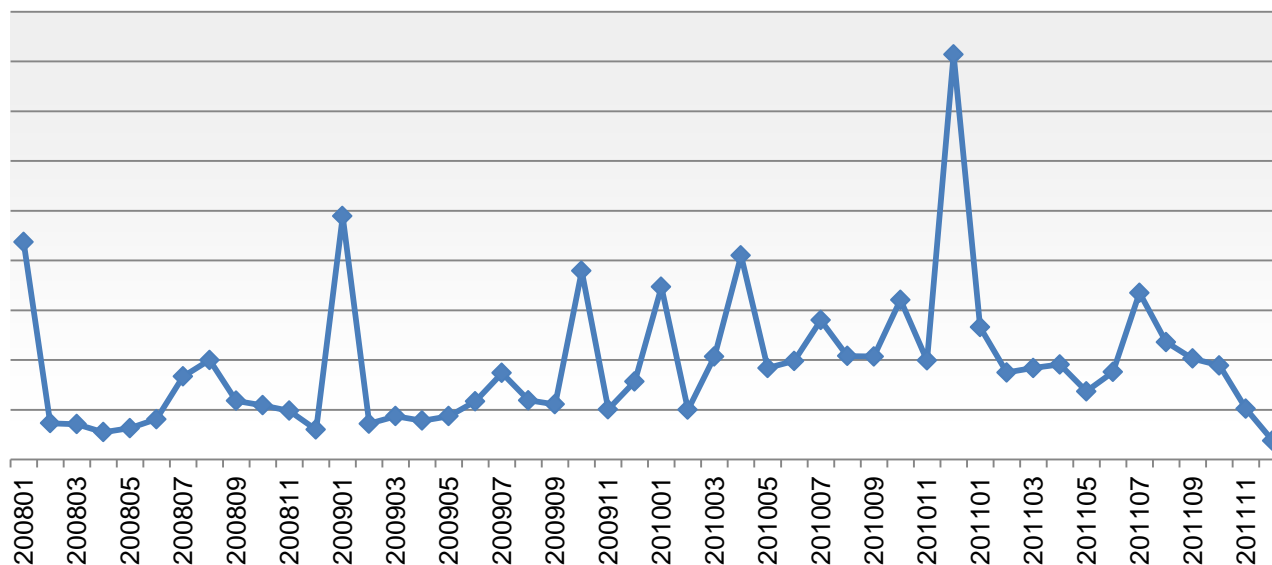
Ready

INTRO Report Summary Univariate Summary Long Char Missing Summary Short Char Frequency Summary Monthly Summary

100%

Provider Monthly Summary Tab

Unique Provider IDs in Provider From Month



Product Report Summary Tab

XXXXX_110_20102011V01_2012_08.xls [Compatibility Mode] - Microsoft Excel

Home Insert Page Layout Formulas Data Review View Nitro PDF SAS

A1 **Total product lines submitted:**

	A	B	C	D	E	F	G	H
1	Total product lines submitted:							
2	Submission Year	Submission Month	Submission Control ID	Count of Product Lines				
3	2010	12						
4	2011	3						
5	2011	5						
6	2011	6						
7	2011	9						
8								
9	Year	Month	Year-Month	Unique ProductIDNumber in Year-Month				
10	2008	01	200801					
11	2008	02	200802					
12	2008	03	200803					
13	2008	04	200804					
14	2008	05	200805					
15	2008	06	200806					
16	2008	07	200807					
17	2008	08	200808					
18	2008	09	200809					
19	2008	10	200810					
20	2008	11	200811					
21	2008	12	200812					
22	2009	01	200901					
23	2009	02	200902					
24	2009	03	200903					
25	2009	04	200904					
26	2009	05	200905					
27	2009	06	200906					
28	2009	07	200907					
29	2009	08	200908					
30	2009	09	200909					
31	2009	10	200910					
32	2009	11	200911					
33	2009	12	200912					

Ready

INTRO Report Summary Univariate Summary Long Char Missing Summary Short Char Frequency Summary Monthly Summary

100%

Product Short Char Frequency Summary Tab

XXXXX_110_20102011V01_2012_08.xls [Compatibility Mode] - Microsoft Excel

	A	B	C	D	E	F	G	H	I	J	K	L	M
	Variable	Value	Frequency	Percent	CumFrequency	CumPercent							
1	ProductLineofBusinessModel	Number_of_Levels	6										
2	ProductLineofBusinessModel	HO		70%		70%							
3	ProductLineofBusinessModel	12		21%		91%							
4	ProductLineofBusinessModel	SA		5%		96%							
5	ProductLineofBusinessModel	16		3%		98%							
6	ProductLineofBusinessModel	13		1%		100%							
7	ProductLineofBusinessModel	MO		0%		100%							
8	ProductBenefitType	Number_of_Levels	1										
9	ProductBenefitType	1		100%		100%							
10	RiskType	Number_of_Levels	2										
11	RiskType	1		90%		90%							
12	RiskType	2		10%		100%							
13	ProductActiveFlag	Number_of_Levels	1										
14	ProductActiveFlag	1		100%		100%							
15	AnnualPerPersonDeductibleCode	Number_of_Levels	1										
16	AnnualPerPersonDeductibleCode	999		100%		100%							
17	AnnualPerFamilyDeductibleCode	Number_of_Levels	1										
18	AnnualPerFamilyDeductibleCode	999		100%		100%							
19	CoordinatedCareModel	Number_of_Levels	1										
20	CoordinatedCareModel	3		100%		100%							
21	RecordType	Number_of_Levels	1										
22	RecordType	PR		100%		100%							
23													
24													
25													
26													
27													
28													
29													
30													
31													
32													
33													

Ready

Eligibility Submissions

Discussion Topic:

Monthly Submissions of Eligibility Data representing eligible persons over a 24 rolling month period.

Minimum of a unique instance of each Member/Product combination per eligibility time period.

DOI Aggregate Reporting

Quarterly Membership Reporting

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
1	0																	
2	Membership for the period																	
3																		
4	HMO Closed Network Plans (excludes dual certificate option plans (POS) and insured preferred provider plans):																	
5																		
6	Members	Barnstable	Berkshire	Bristol	Dukes	Essex	Franklin	Hampden	Hampshire	Middlesex	Nantucket	Norfolk	Plymouth	Suffolk	Worcester	Other States	TOTAL	MASSACHUSETTS TOTAL
7	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at		
8	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter		
9	Groups																0	0
10	Medicare+Choice																0	0
11	Other Medicare																0	0
12	Medicaid																0	0
13	Individual																0	0
14	Other																0	0
15	TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16																		
17																		
18	HMO Insured Preferred Provider Network Plans (includes dual certificate option plans (POS) and insured preferred provider plans):																	
19																		
20	Members	Barnstable	Berkshire	Bristol	Dukes	Essex	Franklin	Hampden	Hampshire	Middlesex	Nantucket	Norfolk	Plymouth	Suffolk	Worcester	Other States	TOTAL	MASSACHUSETTS TOTAL
21	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at	Members at		
22	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter	End of Quarter		
23	Groups																0	0
24	Medicare+Choice																0	0
25	Other Medicare																0	0
26	Medicaid																0	0
27	Individual																0	0
28	Other																0	0
29	TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30																		
31																		
32	Does your HMO report "dually enrolled" members as one member?																	
33																		
34	Does your HMO report "dually enrolled" members as two members?																	
35																		
36	If reported as two members, what percentage of reported membership are "dually enrolled" members?																	
37																		

APCD Quarterly Membership

	A	B	C	D	E	F	G	H	I	J
1	Report #01 - HMO Quarterly Membership									
2	7/1/2012 19:54	Year: 2010	Quarter: 1							
3										
4	MembershipPeri	County	OrgID	OrganizationName	Product	Plan	InsurancePlanMarket	MemberCount	DOI Member Co	Notes
5	2010 Q1	Barnstable			HMO - Closed	Health Maintenance Organization	Group-Employer	50	43	
6	2010 Q1	Berkshire			HMO - Closed	Health Maintenance Organization	Group-Employer	50	25	
7	2010 Q1	Bristol			HMO - Closed	Health Maintenance Organization	Group-Employer	201	139	
8	2010 Q1	Essex			HMO - Closed	Health Maintenance Organization	Group-Employer	687	430	
9	2010 Q1	Franklin			HMO - Closed	Health Maintenance Organization	Group-Employer	16	6	
10	2010 Q1	Hampden			HMO - Closed	Health Maintenance Organization	Group-Employer	133	134	
11	2010 Q1	Worcester			HMO - Closed	Health Maintenance Organization	Group-Employer	465	385	
12	2010 Q1	Hampshire			HMO - Closed	Health Maintenance Organization	Group-Employer	42	42	
13	2010 Q1	Middlesex			HMO - Closed	Health Maintenance Organization	Group-Employer	1070	831	
14	2010 Q1	Norfolk			HMO - Closed	Health Maintenance Organization	Group-Employer	381	238	
15	2010 Q1	Other			HMO - Closed	Health Maintenance Organization	Group-Employer	139		County - Other?
16	2010 Q1	Plymouth			HMO - Closed	Health Maintenance Organization	Group-Employer	379	262	
17	2010 Q1	Suffolk			HMO - Closed	Health Maintenance Organization	Group-Employer	611	174	
18	2010 Q1	Other			HMO - Closed	Health Maintenance Organization	Individual Closed	1		County - Other?
19	2010 Q1	Barnstable			HMO - Open	Health Maintenance Organization	Group-Employer	54	62	
20	2010 Q1	Berkshire			HMO - Open	Health Maintenance Organization	Group-Employer	32	35	
21	2010 Q1	Bristol			HMO - Open	Health Maintenance Organization	Group-Employer	64	74	
22	2010 Q1	Essex			HMO - Open	Health Maintenance Organization	Group-Employer	183	402	
23	2010 Q1	Franklin			HMO - Open	Health Maintenance Organization	Group-Employer	9	18	
24	2010 Q1	Hampden			HMO - Open	Health Maintenance Organization	Group-Employer	295	250	
25	2010 Q1	Worcester			HMO - Open	Health Maintenance Organization	Group-Employer	176	228	
26	2010 Q1	Hampshire			HMO - Open	Health Maintenance Organization	Group-Employer	50	43	
27	2010 Q1	Middlesex			HMO - Open	Health Maintenance Organization	Group-Employer	219	388	
28	2010 Q1	Nantucket			HMO - Open	Health Maintenance Organization	Group-Employer	1	0	
29	2010 Q1	Norfolk			HMO - Open	Health Maintenance Organization	Group-Employer	130	172	
30	2010 Q1	Other			HMO - Open	Health Maintenance Organization	Group-Employer	62		County - Other?
31	2010 Q1	Plymouth			HMO - Open	Health Maintenance Organization	Group-Employer	91	117	
32	2010 Q1	Suffolk			HMO - Open	Health Maintenance Organization	Group-Employer	103	133	
33	Payer - missing 19 Individual Closed members in Berkshire, Essex, Hampshire, Middlesex, Plymouth, Suffolk									
34	2010 Q1	Barnstable			HMO - Closed	Health Maintenance Organization	Individual - Commonwealth Choice	292	1871	Missing Individual Merged
35	2010 Q1	Berkshire			HMO - Closed	Health Maintenance Organization	Individual - Commonwealth Choice	163	664	
36	2010 Q1	Bristol			HMO - Closed	Health Maintenance Organization	Individual - Commonwealth Choice	336	2055	
37	2010 Q1	Dukes			HMO - Closed	Health Maintenance Organization	Individual - Commonwealth Choice	56	236	
38	2010 Q1	Essex			HMO - Closed	Health Maintenance Organization	Individual - Commonwealth Choice	593	4153	
39	2010 Q1	Franklin			HMO - Closed	Health Maintenance Organization	Individual - Commonwealth Choice	57	323	
40	2010 Q1	Hampden			HMO - Closed	Health Maintenance Organization	Individual - Commonwealth Choice	232	1110	
41	2010 Q1	Middlesex			HMO - Closed	Health Maintenance Organization	Individual - Commonwealth Choice	1569	9708	
42	2010 Q1	Hampshire			HMO - Closed	Health Maintenance Organization	Individual - Commonwealth Choice	168	728	
43	2010 Q1	Worcester			HMO - Closed	Health Maintenance Organization	Individual - Commonwealth Choice	487	2839	
44	2010 Q1	Nantucket			HMO - Closed	Health Maintenance Organization	Individual - Commonwealth Choice	51	293	
45	2010 Q1	Norfolk			HMO - Closed	Health Maintenance Organization	Individual - Commonwealth Choice	757	4653	

DOI Aggregate Reporting List

<u>Report</u>	<u>Number</u>
HMO Quarterly Membership	1
HMO Supplemental Utilization - Inpatient Non-Behavioral Health Utilization Data	2
HMO Supplemental Utilization - Inpatient Behavioral Health Utilization Data – Closed Network Plans only	3
HMO Supplemental Utilization - Inpatient Behavioral Health Utilization Data – Preferred Provider Network Plans only	4
HMO Supplemental Utilization - Intermediate Care Behavioral Health Utilization Data – Closed Network Plans only	5
HMO Supplemental Utilization - Intermediate Care Behavioral Health Utilization Data – Preferred Provider Network Plans only	6
HMO Supplemental Utilization - Outpatient Non-Behavioral Health Utilization Data	7
HMO Supplemental Utilization - Outpatient Behavioral Health Utilization Data – Closed Network Plans only	8
HMO Supplemental Utilization - Outpatient Behavioral Health Utilization Data – Preferred Provider Network Plans only	9
HMO Supplemental Utilization - Member Months – Closed Network Plans only	10
HMO Supplemental Utilization - Member Months – Preferred Provider Network Plans only	11
Individual/Small Group Membership – Young Adult	14
Individual/Small Group Membership – Individual	15
Individual/Small Group Membership – Group Membership	16
Member - Medicare Supplemental Plans (both workbooks)	18
Member – Medicare Advantage HMO (both workbooks)	19
Member – Medicare Prescription Drug (Part D) (both workbooks)	20
Member and Utilization Statistics for Insured Preferred Provider Plans – Membership	21
Member and Utilization Statistics for Insured Preferred Provider Plans – Inpatient Utilization	22
Member and Utilization Statistics for Insured Preferred Provider Plans – Outpatient Utilization	23

Sister Agency Data Needs - Sample

MC005	Line Counter		ME003	Insurance Type Code		PC005	Line Counter
MC005A	Version Number		ME007	Coverage Level Code		PC005A	Version Number
MC008	Plan Specific Contract Number		ME009	Plan Specific Contract Number		PC008	Plan Specific Contract Number
MC012	Member Gender		ME013	Member Gender		PC012	Member Gender
MC013	Member Date of Birth (year)		ME014	Member Date of Birth (year)		PC013	Member Date of Birth (year)
MC015	Member State or Province		ME016	Member State or Province		PC015	Member State or Province
MC020	Admission Type		ME018	Medical Coverage		PC025	Claim Status
MC021	Admission Source		ME019	Prescription Drug Coverage		PC026	Drug Code
MC023	Discharge Status		ME028	Primary Insurance Indicator		PC028	New Prescription or Refill
MC030	Servicing Provider		ME029	Coverage Type		PC029	Generic Drug Indicator
MC032	Service Provider Specialty		ME030	Market Category Code		PC030	Dispensed as written code
MC034	Service Provider State		ME049	Member Deductible		PC033	Quantity Dispensed
MC036	Type of Bill - on Facility Claims		ME050	Member Deductible Used		PC034	Days Supply
MC037	Site of Service		ME051	Behavioral Health Benefit Flag		PC035	Charge Amount
MC038	Claim Status		ME059	Disability Indicator Flag		PC036	Paid Amount
MC039	Admitting Diagnosis		ME063	Benefit Status		PC039	Dispensing Fee
MC040	E-Code		ME066	COBRA Status		PC040	Copay Amount
MC041	Principal Diagnosis		ME073	Fully insured member		PC041	Coinsurance Amount
MC042-53	Other Diagnosis - 1 - 12		ME109	Subscriber State or Province		PC042	Deductible Amount
MC054	Revenue Code		ME111	Medical Deductible		PC069	Member Self Pay Amount
	Procedure Codes		ME112	Pharmacy Deductible		PC110	Claim Line Type
MC056 - 57	Procedure Modifier - 1, 2, 3, 4		ME113	Medical and Pharmacy Deductible			
MC113	Payment Arrangement Type					PR006	Product Benefit Type
MC058	ICD Primary Procedure Code					PR008	Risk type
MC061	Quantity					PR011	Product Active Flag
MC062	Charge Amount					PR012	Annual Per Person Deductible Code
MC063	Paid Amount					PR013	Annual Per Family Deductible Code
MC064	Prepaid Amount						

EDIT UPDATE

Edit Update – Versioning Edits

Line Failures

- Fail Line when DC005A (Version) = 0 and DC059 (Claim Line Type) = V, R, B, or A
- **Edit Language:** Claim Line Type (DC059) must be O when Version (DC005A) is 0.
- Fail Line when MC005A (Version) = 0 and MC094 (Claim Line Type) = V, R, B, or A
- **Edit Language:** Claim Line Type (MC094) must be O when Version (DC005A) is 0.
- Fail Line when PC005A (Version) = 0 and PC110 (Claim Line Type) = V, R, B or A
- **Edit Language:** Claim Line Type (PC110) must be O when Version (DC005A) is 0.

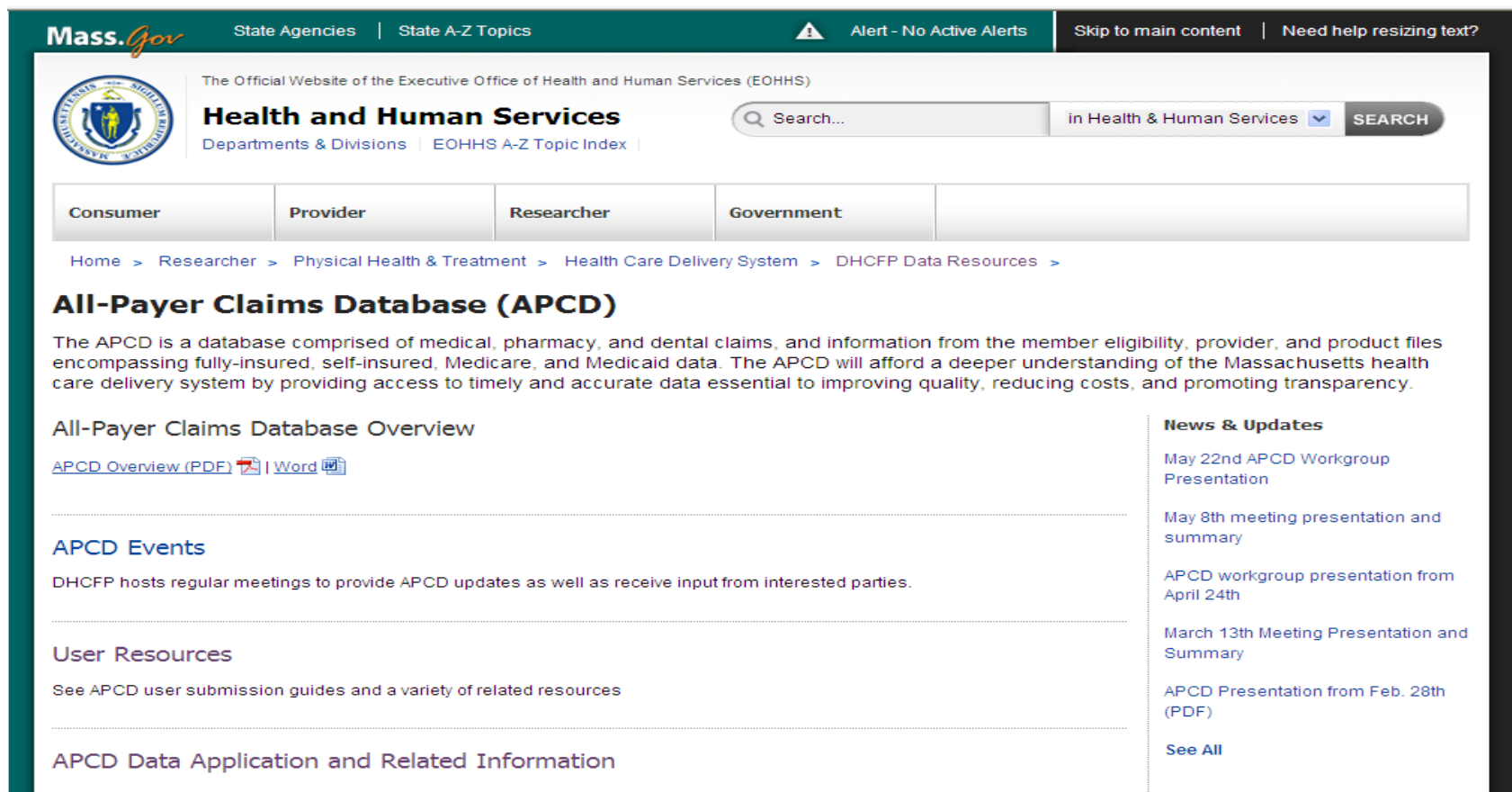
- Fail Line when DC060 (Former Claim Number) is populated and DC005A (Version) = 0
- **Edit Language:** Former Claim Number (DC060) must be blank when Version (DC005A) is 0.
- Fail Line when MC139 (Former Claim Number) is populated and MC005A (Version) = 0
- **Edit Language:** Former Claim Number (MC139) must be blank when Version (DC005A) is 0.
- Fail Line when PC111 (Former Claim Number) is populated and PC005A (Version) = 0
- **Edit Language:** Former Claim Number (PC111) must be blank when Version (DC005A) is 0.

MemberID Edits

Inconsistent Values	
Percentage of distinct CarrierSpecificUniqueMemberIDs in the Eligibility file.	While we realize that a person can be within the file multiple times, there should be a reasonable percentage check that would flag an exaggerated number of distinct members.
Percentage of time a CarrierSpecificUniqueMemberID has the occurrence of a differing last name.	While we realize it is possible for this field to change, it should not be frequent. What would be an acceptable percentage?
Percentage of time a CarrierSpecificUniqueMemberID has the occurrence of a differing first name.	While we realize it is possible for this field to change, it should not be frequent. What would be an acceptable percentage?
Percentage of time a CarrierSpecificUniqueMemberID has the occurrence of a differing MemberIdentificationCode (SSN).	While we realize it is possible for this field to change, it should not be frequent. What would be an acceptable percentage?
Percentage of time a CarrierSpecificUniqueMemberID has the occurrence of a differing MemberDateOfBirth	While we realize it is possible for this field to change, it should not be frequent. What would be an acceptable percentage?
Percentage of time a CarrierSpecificUniqueMemberID has the occurrence of a differing Gender	While we realize it is possible for this field to change, it should not be frequent. What would be an acceptable percentage?

APCD Resources for Payers

Updated APCD Website - www.mass.gov/dhcfp/apcd



The screenshot shows the official website of the Executive Office of Health and Human Services (EOHHS) for the All-Payer Claims Database (APCD). The header includes the Mass.gov logo, navigation links for State Agencies and State A-Z Topics, an alert bar indicating no active alerts, and links to skip to main content or need help resizing text. The main content area features the EOHHS logo, a search bar, and a navigation menu with tabs for Consumer, Provider, Researcher, and Government. The Researcher tab is selected, leading to a breadcrumb trail: Home > Researcher > Physical Health & Treatment > Health Care Delivery System > DHCFP Data Resources >. The main heading is "All-Payer Claims Database (APCD)", followed by a paragraph describing the database's purpose. Below this are sections for "All-Payer Claims Database Overview" (with links to PDF and Word versions), "APCD Events" (mentioning regular meetings), "User Resources" (linking to submission guides), and "APCD Data Application and Related Information". A right-hand sidebar titled "News & Updates" lists recent presentations: May 22nd APCD Workgroup Presentation, May 8th meeting presentation and summary, APCD workgroup presentation from April 24th, March 13th Meeting Presentation and Summary, and APCD Presentation from Feb. 28th (PDF), with a "See All" link at the bottom.

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All-Payer Claims Database (APCD)

The APCD is a database comprised of medical, pharmacy, and dental claims, and information from the member eligibility, provider, and product files encompassing fully-insured, self-insured, Medicare, and Medicaid data. The APCD will afford a deeper understanding of the Massachusetts health care delivery system by providing access to timely and accurate data essential to improving quality, reducing costs, and promoting transparency.

All-Payer Claims Database Overview

[APCD Overview \(PDF\)](#) | [Word](#)

APCD Events

DHCFP hosts regular meetings to provide APCD updates as well as receive input from interested parties.

User Resources

See APCD user submission guides and a variety of related resources

APCD Data Application and Related Information

News & Updates

- May 22nd APCD Workgroup Presentation
- May 8th meeting presentation and summary
- APCD workgroup presentation from April 24th
- March 13th Meeting Presentation and Summary
- APCD Presentation from Feb. 28th (PDF)

[See All](#)

APCD Resources for Payers

Updated USER RESOURCES section -

User Resources - Health and Human Services - Mass.Gov - Windows Internet Explorer






















http://www.mass.gov/eohhs/researcher/physical-health/health-care-delivery/hcf-data-resources/apcd/user-resources.html

Google

Favorites User Resources - Health and Human Services - Mass....

Page Safety Tools

All-Payer Claims Database User Submission Guides

User Submission Guides	Format	Edits
Medical Claims File Submission Guide	PDF  / Word 	Zip File 
Pharmacy Claims File Submission Guide	PDF  / Word 	Zip File 
Dental Claims File Submission Guide	PDF  / Word 	Zip File 
Member Eligibility File Submission Guide	PDF  / Word 	Zip File 
Product File Submission Guide	PDF  / Word 	Zip File 
Provider File Submission Guide	PDF  / Word 	Zip File 
Master List of File Edits (includes edits to Medical Claims, Dental Claims, Pharmacy Claims, Member Eligibility, Product File, and Provider File)	PDF  / Excel 	Zip File 

Internet 200%

APCD Technical Assistance Group (TAG) meeting with Payers

- Monthly meeting to provide technical assistance and provide updates on recent APCD developments
- Payers are encouraged to send at least one designee to participate in the discussion
- 2nd Tuesday of each month @ 2pm EST
- Link to webinar registration for meetings through 2012
<https://www3.gotomeeting.com/register/941044990>

Q&A with Health Care Payers

- Questions emailed to APCD Liaisons
- Questions emailed to DHCFP (dhcfp.apcd@state.ma.us)
- Questions on the Data Release and Application emailed to DHCFP (apcd.data@state.ma.us)
- Open discussion

For more information:

Upcoming Schedule	
APCD Combined Workgroup 4 th Tuesday of each month	Next meeting on August 28th
APCD Technical Assistance Group (TAG) Webinar 2 nd Tuesday of each month	Next meeting on September 11th

- Send questions and feedback to dhcfp.apcd@state.ma.us
- For more information, including important updates and events, please visit: www.mass.gov/dhcfp/apcd